PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.		
CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 03 DEC 31 AM 8: 59 05 DEC 31 AM 8: 59
DOCUMENT # NO100006380		SECRETARY OF STATE TALLAHASSEE, FLORIDA
Hand-N-Hand, Inc		
,		
2. Principal Office Address	3. Mailing Office Address	
112 Avenue E SW Suite, Apt. #, etc.	P.O. Box 7166 Suite, Apt. #; etc.	REINSTATEMENT 03
City & Chate	City & State	4. Date Incorporated or Qualified To Do Business in Florida 9-7-2001
Winter Haven, Fi		5. FEI Number Applied For Not Applicable
	33883-7166 USA	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent Name		
Karin G. Nelson		
Street Address (P.O. Box Number is Not Acceptable) // 2		
City State Zip Code		
Winter Haven FL 33880		
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent Harring Byleson Date 1/4/29/2003 REGISTERED AGENT MUST SIGN		
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)		
Titles Name of Officers and/or Directors	Street Address of Eacl Officer and/or Directo	
P Lindak Bac	hman 357 Winter Rid	ge Blud Winter Haven FE 33881
D James W Clau	ssen 185 Browning	Circle Winter Haven FL 33884
D Larry A Pow		
Treas Karin G Nels	son 236 Hernando	Rd SE Winter Haven FL 33 ? 84
D Nancy Kin	g 1004 Snively	Blvd Winter Haven FL 33 880
D. Jane Water	<i>II</i>	SE Winter Haven FL 33880
10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated		
on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. Karin & NE 500 SIGNATURE: **LARIN & MULSO*** 12/29/2003 294-5462		
SIGNATURE: # SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylime Phone #		

-fa

December 29, 2003

Department of State, Division of Corporations, P.O. Box 6327, Tallahassee, FL. 32314.

Subject: Hand-N-Hand, Inc.

Document # N0100006380

Dear Sirs:

Enclosed you will find the 2003 UBR report for Hand-N-Hand, Inc. It was recently brought to my attention that the 2003 report had never been filed when the Department of Agriculture, Division of Consumer Services renewed the Hand-N-Hand, Inc. official registration under Chapter 496, Florida Statutes, the Solicitation of Contributions Act..

Apparently, the 2003 UBR mailed out by the Division of Corporations was either misdirected at the post office in the forwarding process or returned. Linda Bachman, the founder of this organization, sent in the previous UBR report with information regarding a change of address but did not change the address on the report. She is not familiar with the importance of this annual report and did not recognize that she had not received a 2003 form. Her address of record has been in Winter Haven for more than a year. The organization now has a permanent mailing address which should prevent this problem from happening again in the future.

We respectfully request abrogation of the penalty for late filing/reinstatement. The organization now has board members with business experience who will keep on top of the appropriate Florida filing requirements. If you have any questions, please feel free to contact me at 863-294-5462.

Sincerely,

Karin G. Nelson, EA

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